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BOX PATENT APPLICATION
ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, DC 20231

Express Mail No.: EL674751683US

Attorney Docket No.: 2002906-0002 (Duke No.1681)

Date Filed: August 16, 2001

UTILITY PATENT APPLICATION TRANSMITTAL

(for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Dear Sir:

Please find enclosed a patent application and papers as follows for:

Inventor(s):

Given Name (first and middle)

Family Name or Surname

Residence

Shannon	Mitchell	Durham, NC	
Jennifer	Koh	Irvine, CA	
Vikas	Prabhaker	Durham, NC	·
Laura	Niklason	Hillsborough, NC	

<u>Title of the Invention</u>: DECELLULARIZED TISSUE ENGINEERED CONSTRUCTS AND TISSUES

A) APPLICATION ELEMENTS:

1) ___ Fee Transmittal Form (original and duplicate submitted for fee processing)

Express Mail No.: EL674751683US Date Filed: August 16, 2001

2) X Applicant Claims Small Entity Status (see 37 CFR 1.27)				
a) X Statement Verifying Small Entit	y Status (optional)			
3) X Specification -Descriptive Title of the Invention	TOTAL PAGES:	76		
-Government Support -Cross References to Related Applications -Background of the Invention -Summary of the Invention -Definitions -Brief Description of the Drawing -Detailed Description Of Certain Preferred -Examples -Claim(s) -Abstract of the Invention				
4) X Drawing(s) (35 U.S.C. § 113)	TOTAL SHEETS:	9		
a) Formal Drawings (if checked)				
5) X Oath or Declaration	TOTAL PAGES:	3		
a) Newly Executed (original or copy)				
b) Copy from a prior application (3 continuation/divisional application)				
i) <u>Deletion of inventor(s)</u> : Signed in the prior application, see 37 C				
c) X Unexecuted				
6) Application Data Sheet. See 37 CFR 1.	76.			
7) CD-ROM or CD-R in duplicate, large (Appendix) with Transmittal	e table or Computer Pro	ogram		
8) Nucleotide and/or Amino Acid Sequencessary)	nce Submission (if appli	cable, all are		
a) Computer Readable Form (CRF)				
b) Specification Sequence Listing or	n:			
i) CD-ROM or CR-R (2 copi	es): or			

Express Mail No.: EL674751683US Date Filed: August 16, 2001

ii) Paper					
c) Statements veri	rifying identity of above copies				
B) ACCOMPANYING APPLICATION	ON PARTS:				
9) Assignment Papers	9) Assignment Papers (cover sheet & document(s))				
10) 37 C.F.R. § 3.73(b) §	10) 37 C.F.R. § 3.73(b) Statement (when there is an assignee)				
11) X Power of Attorney					
12) English Translation	n Dogument (if applicable)				
13) Information Disclos	sure Statement (IDS)/PTO-1449				
14) Copies of IDS Citati	ions				
15) Preliminary Amend	dment				
16) X Return Receipt Pos	stcard (MPEP 503) (specifically itemized)				
17) Certified Copy of F	Priority Document(s) (if foreign priority is claimed)				
18) OTHER: (if applica	able, specified below)				
information is provided below and in	ATIONS: (the appropriate box is checked, and certain a preliminary amendment) DIVISIONAL CONTINUATION-IN-PART (CIP)				
OF PRIOR APPLICATION NO:					
FILED:	<u> </u>				
EXAMINER:					
GROUP/ART UNIT:					
THE PRIOR APPLICATION, FROM DETAILED ABOVE, IS CONSIDERE	WHICH AN OATH OR DECLARATION IS SUPPLIED AS ED A PART OF THE DISCLOSURE OF THE ACCOMPANYING APPLICATION AND IS HEREBY INCORPORATED BY				

Express Mail No.: EL674751683US Date Filed: August 16, 2001

REFERENCE.

D.) PRIORITY CLAIM(S):

This application claims the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America listed below:

Application Number	Filing Date	Status					
Application Number	Filing Date	Status					
Application Number	Filing Date	Status					
PCT Applications designating the United States:							
Application Number	Filing Date	Status					
This application claims the benefit States provisional application(s) lis		ode, §119(e) of any United					
Provisional Application(s):							
60/225,698	8/16/2000	Pending					

Filing Date

Status

E) METHOD OF PAYMENT OF FILING FEES FOR THIS APPLICATION:

____ Applicant claims small entity status 37 CFR 1.27

X A check is enclosed to cover the filing fees as determined on the fee transmittal enclosed herewith.

X The commissioner is hereby authorized to charge filing fees or credit any overpayment to deposit account number 03-1721.

Total filing fee amount \$ 2554.00

Express Mail No.: EL674751683US Date Filed: August 16, 2001

Application Number

F) <u>CORRESPONDENCE ADDRESS:</u>

- X Customer Bar Code Label:
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Respectfully Submitted,

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